

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Facility Information**

**Facility Name:** FOUNTAINHEAD HOMES (0009770)

**Address:** 5222 HAMMERSLEY RD, MADISON, WI 53711

**License Status:** REGULAR

**Licensed/Certified/Registered** 08/01/2003

**Regional Office:** SOUTHERN REGION (MADISON), (608) 243-2370

**Survey History**

**Survey ID:** 0095145      **End Date:** 06/15/2005      **Type:** STANDARD      **Purpose:** SURVEY/COMPLAINT/SELF REPORT

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #10008244    Served 07/11/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.21(4)(o)	MEDICATIONS		
83.21(4)(p)	PROMPT AND ADEQUATE TREATMENT		
83.31(1)	GENERAL REQUIREMENTS		
83.32(2)(a)	INDIVIDUALIZED SERVICE PLAN-SCOPE		

**Survey ID:** 0094576      **End Date:** 04/12/2005      **Type:** OTHER      **Purpose:** DESK REVIEW

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Survey ID: 0093399      End Date: 09/23/2004      Type: STANDARD      Purpose: COMPLAINT/SELF REPORT**

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #10008051    Served 10/07/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.14(1)(a)3	CLIENT GROUP SPECIFIC TRAINING	06/15/2005	Yes
83.19(3)(d)	WHEREABOUTS UNKNOWN	06/15/2005	Yes
83.33(2)(a)	SUPERVISION		
83.42(2)(a)	EVALUATION RESIDENT EVACUATION LIMITS	06/15/2005	Yes

**Survey ID: 0091663      End Date: 12/08/2003      Type: OTHER      Purpose: VERIFICATION VISIT**

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID: 0090717      End Date: 07/16/2003      Type: STANDARD      Purpose: SURVEY**

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #10007819    Served 08/06/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(b)intro	ENTITY BACKGROUND CHECK REQUIREMENTS	12/08/2003	Yes
83.13(7)(a)9	TRAINING AND INSERVICE REQUIREMENTS	10/05/2004	Yes
83.14(1)(a)	CLIENT RELATED TRAINING	10/05/2004	Yes
83.14(1)(a)3	CLIENT GROUP SPECIFIC TRAINING	06/15/2005	Yes
83.14(1)(d)	FIRE SAFETY, FIRST AID & CHOKING	10/05/2004	Yes
83.16(1)	ADMISSIONS AGREEMENT	10/05/2004	Yes
83.32(2)(a)	INDIVIDUALIZED SERVICE PLAN-SCOPE	10/05/2004	Yes
83.32(3)	SIGNING ASSESSMENT AND ISP	10/05/2004	Yes
83.42(2)(a)	EVALUATION RESIDENT EVACUATION LIMITS	06/15/2005	Yes

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**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Enforcement History**

**Date: 06/30/2005      SOD #10008244      Appealed: Yes      Decision: STIPULATION**

Sanctions

PROVIDE TRAINING  
FORFEITURE---83.21(4)(o)  
FORFEITURE---83.21(4)(p)  
FORFEITURE---83.31(1)  
FORFEITURE---83.32(2)(a)

**Date: 10/05/2004      SOD #10008051      Appealed: Yes      Decision: PENDING**

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION  
FORFEITURE---83.14(1)(a)3  
FORFEITURE---83.19(3)(d)  
FORFEITURE---83.33(2)(a)  
FORFEITURE---83.42(2)(a)

**Date: 08/05/2003      SOD #10007819      Appealed: Yes      Decision: STIPULATION**

Sanctions

FORFEITURE---83.13(7)(a)9  
FORFEITURE---83.14(1)(a)  
FORFEITURE---83.14(1)(d)  
FORFEITURE---83.32(2)(a)

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**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Complaint History**

**Date Complaint Received: 10/28/2004**

**Date Investigation Completed: 06/15/2005**

Subject Area(s)

ABUSE  
NUTRITION & FOOD SERVICES  
MEDICATIONS  
ADMINISTRATION  
QUALITY OF LIFE  
OTHER

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

10008244

**Date Complaint Received: 10/07/2004**

**Date Investigation Completed: 06/30/2005**

Subject Area(s)

ABUSE  
ADMINISTRATION

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 06/22/2004**

**Date Investigation Completed: 09/23/2004**

Subject Area(s)

SUPERVISION

Result

SUBSTANTIATED

SOD #

10008051

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